

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

FRIENDS OF STEWART MILLS

ADDRESS (number and street)
▼

PO BOX 1039

Check if different
than previously
reported. (ACC)

BRAINERD

MN

56401

2. FEC IDENTIFICATION NUMBER ▼

C

C00588871

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

MN

08

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer DIANE JOHNSON

Signature of Treasurer

DIANE JOHNSON

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

04

14

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

FRIENDS OF STEWART MILLS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	215078.71	473473.71
(b) Total Contribution Refunds (from Line 20(d))	250.00	250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	214828.71	473223.71
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	154831.65	241154.35
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	154831.65	241154.35
8. Cash on Hand at Close of Reporting Period (from Line 27).....	232069.36	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 97

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

FRIENDS OF STEWART MILLS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
01 / 01 / 2016

To:

M M / D D / Y Y Y Y
03 / 31 / 2016

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

98124.44

272479.44

(ii) Unitemized.....

68849.26

126589.26

(iii) TOTAL of contributions from individuals ▶

166973.70

399068.70

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

34500.00

50000.00

(d) The Candidate.....

13605.01

24405.01

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

215078.71

473473.71

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

215078.71

473473.71

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 97

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	154831.65	241154.35
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	250.00	250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	250.00	250.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	155081.65	241404.35

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	172072.30
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	215078.71
25. SUBTOTAL (add Line 23 and Line 24).....	387151.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	155081.65
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	232069.36

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MR. DEAN M AKINS

Mailing Address PO BOX 390195

City

EDINA

State

MN

Zip Code

55439

FEC ID number of contributing
federal political committee.

C

Name of Employer

PREMIER PROPERTIES LLC

Occupation

PROPERTY MANAGEMENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2016

Transaction ID : SA11AI.8456

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ARLIN ALBRECHT

Mailing Address 30567 LAKEVIEW AVENUE

City

RED WING

State

MN

Zip Code

55066

FEC ID number of contributing
federal political committee.

C

Name of Employer

RED WING PUBLISHING

Occupation

PUBLISHERS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		13		2016

Transaction ID : SA11AI.8295

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MARILYN ALBRECHT

Mailing Address 30567 LAKEVIEW AVE

City

RED WING

State

MN

Zip Code

55066-5655

FEC ID number of contributing
federal political committee.

C

Name of Employer

REDWING PUBLISHING CO.

Occupation

PUBLISHER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2016

Transaction ID : SA11AI.8536

Amount of Each Receipt this Period

750.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 97

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
FRIENDS OF STEWART MILLSFull Name (Last, First, Middle Initial)
PATRICK D. ALEXANDER

Mailing Address 16540 GRAYS BAY BOULEVARD

City	State	Zip Code
WAYZATA	MN	55391-2915

FEC ID number of contributing
federal political committee.

C

Name of Employer
COLDSPRINGOccupation
CEO/CHARIMAN OF BD

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2016

Transaction ID : SA11AI.7990

Amount of Each Receipt this Period

500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
MR. JOHN ALLEN

Mailing Address 321 1ST AVENUE N

City	State	Zip Code
MINNEAPOLIS	MN	55401

FEC ID number of contributing
federal political committee.

C

Name of Employer
ENTREPRENEUROccupation
ENTREPRENEUR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.7912

Amount of Each Receipt this Period

2500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
BARBARA ANDERSON

Mailing Address 3630 PLUM CREEK ROAD

City	State	Zip Code
SAINT CLOUD	MN	56301-9540

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.9836

Amount of Each Receipt this Period

2700.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
FRIENDS OF STEWART MILLS

A. Full Name (Last, First, Middle Initial) CLIFF ANDERSON		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>03</td> <td></td> <td>2016</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02		03		2016
M M M	/	D D D	/	Y Y Y Y Y Y									
02		03		2016									
Mailing Address 5300 KELSEY TERRACE		Transaction ID : SA11AI.7654											
City EDINA	State MN	Zip Code 55436											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>		500.00									
500.00													
Name of Employer RETIRED	Occupation RETIRED		<input type="checkbox"/> Memo Item										
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>500.00</td> </tr> </table>		500.00										
500.00													

B. Full Name (Last, First, Middle Initial) ELSIEMAE ANDERSON		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>25</td> <td></td> <td>2016</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02		25		2016
M M M	/	D D D	/	Y Y Y Y Y Y									
02		25		2016									
Mailing Address 11959 NORTHGATE LANE		Transaction ID : SA11AI.8455											
City CROSSLAKE	State MN	Zip Code 56442-2065											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>110.00</td> </tr> </table>		110.00									
110.00													
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		<input type="checkbox"/> Memo Item										
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>220.00</td> </tr> </table>		220.00										
220.00													

C. Full Name (Last, First, Middle Initial) JIM ANDERSON		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>15</td> <td></td> <td>2016</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	01		15		2016
M M M	/	D D D	/	Y Y Y Y Y Y									
01		15		2016									
Mailing Address 13380 RUSH HARBOR LN		Transaction ID : SA11AI.8167											
City CROSSLAKE	State MN	Zip Code 56442-2125											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00									
1000.00													
Name of Employer CONTRACTOR	Occupation ANDERSON BROS.		<input type="checkbox"/> Memo Item										
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00										
1000.00													

SUBTOTAL of Receipts This Page (optional).....	<table border="1"> <tr> <td>1610.00</td> </tr> </table>	1610.00
1610.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MR. MARK ANDERSON

Mailing Address 8182 COUNTY ROAD 78
401

City	State	Zip Code
LAKE SHORE	MN	56468

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
PILOT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

Transaction ID : SA11AI.9610

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROLLIS ANDERSON

Mailing Address 3630 PLUM CREEK DR

City	State	Zip Code
SAINT CLOUD	MN	56301-9540

FEC ID number of contributing
federal political committee.

C

Name of Employer
ANDERSON TRUCKING SERVICEOccupation
CEO

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.9835

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RICHARD D ASHMUN

Mailing Address 13150 CYPRESS DRIVE, 309

City	State	Zip Code
BAXTER	MN	56425-8544

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

Transaction ID : SA11AI.8806

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

H. T. BECKEN

A.

Mailing Address 11860 - 21ST NORTH

City

LAKE ELMO

State

MN

Zip Code

55042

FEC ID number of contributing
federal political committee.

C

Name of Employer

CEMSTONE

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2016

Transaction ID : SA11AI.9354

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. STEPHEN BENNETT

B.

Mailing Address 90 CLAY CLIFFE DRIVE

City

TONKA BAY

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer

VILLAGE AUTOMOTIVE GROUP

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.7193

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BARRY BERGQUIST

C.

Mailing Address 318 AVENUE D

City

CLOQUET

State

MN

Zip Code

55720-1515

FEC ID number of contributing
federal political committee.

C

Name of Employer

BURGQUIST IMPORTS

Occupation

BUSINESSMAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2016

Transaction ID : SA11AI.8274

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 97
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF STEWART MILLS

A. Full Name (Last, First, Middle Initial) MR. JASON BERNICK			Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2016	
Mailing Address 40494 COUNTY RD 1			Transaction ID : SA11AI.9815	
City RICE	State MN	Zip Code 56367-7505	Amount of Each Receipt this Period 4900.00	
FEC ID number of contributing federal political committee. C		Name of Employer BERNICK'S		
Occupation MANAGEMENT		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date 5400.00		<input type="checkbox"/> Memo Item SEE REDESIGNATION		
B. Full Name (Last, First, Middle Initial) MR. JASON BERNICK			Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2016	
Mailing Address 40494 COUNTY RD 1			Transaction ID : SA11AI.9815.0	
City RICE	State MN	Zip Code 56367-7505	Amount of Each Receipt this Period -2700.00	
FEC ID number of contributing federal political committee. C		Name of Employer BERNICK'S		
Occupation MANAGEMENT		Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date 2700.00		<input checked="" type="checkbox"/> Memo Item REDESIGNATION TO GENERAL		
C. Full Name (Last, First, Middle Initial) MR. JASON BERNICK			Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2016	
Mailing Address 40494 COUNTY RD 1			Transaction ID : SA11AI.9815.1	
City RICE	State MN	Zip Code 56367-7505	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. C		Name of Employer BERNICK'S		
Occupation MANAGEMENT		Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Election Cycle-to-Date 5400.00		<input checked="" type="checkbox"/> Memo Item REDESIGNATION FROM PRIMARY		
SUBTOTAL of Receipts This Page (optional).....			4900.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 97

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF STEWART MILLS

A. Full Name (Last, First, Middle Initial)
JAMES BISSETT

Mailing Address 9263 N 117TH STREET

City State Zip Code
 SCOTTSDALE AZ 85259-6359

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 SELF BUSINESS CONSULTANT

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 750.00

Date of Receipt

M M / D D / Y Y Y Y
 03 01 2016

Transaction ID : SA11AI.9396

Amount of Each Receipt this Period

500.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
HARVEY BLONIGEN

Mailing Address 11713 CARTIER AVENUE

City State Zip Code
 BURNSVILLE MN 55337

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 RETIRED RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt

M M / D D / Y Y Y Y
 01 22 2016

Transaction ID : SA11AI.9844

Amount of Each Receipt this Period

500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
JULIE BOGENHOLM

Mailing Address 4460 COUNTY ROAD 13

City State Zip Code
 MOOSE LAKE MN 55767-8105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 BOGENHOLM PROPERTIES, LLC REAL ESTATE

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 300.00

Date of Receipt

M M / D D / Y Y Y Y
 02 29 2016

Transaction ID : SA11AI.9433

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MR. BRIAN C BURGESSON

Mailing Address 3759 NEW BRIGHTON ROAD

City

ARDEN HILLS

State

MN

Zip Code

55112-3214

FEC ID number of contributing
federal political committee.

C

Name of Employer

WILDLIFE RESEARCH CENTER, INC.

Occupation

EXEC./SALES

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2016

Transaction ID : SA11AI.9976

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JAMES CAMPION

Mailing Address 3918 HIGHWAY 55 SE

City

BUFFALO

State

MN

Zip Code

55313-5228

FEC ID number of contributing
federal political committee.

C

Name of Employer

ZIRC CO

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : SA11AI.7988

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PATRICIA A CARLSON

Mailing Address 1715 TRAIL DRIVE

City

DULUTH

State

MN

Zip Code

55803-1536

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2016

Transaction ID : SA11AI.7447

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

ROBIN CARLSON

Mailing Address 38277 MOCCASIN DRIVE

City

CROSSLAKE

State

MN

Zip Code

56442-4109

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

Transaction ID : SA11AI.9950

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ELSA CARPENTER

Mailing Address 18735 11TH AVENUE N

City

PLYMOUTH

State

MN

Zip Code

55447-2508

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		04		2016

Transaction ID : SA11AI.7958

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. GREG CAUCCI

Mailing Address P.O. BOX 736

City

EVELETH

State

MN

Zip Code

55734

FEC ID number of contributing
federal political committee.

C

Name of Employer

GRANT CONSTRUCTION

Occupation

CARPENTER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

Transaction ID : SA11AI.9607

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

950.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

STEVEN CHENEY

Mailing Address 11915 COUNTY ROAD 10

City

PLYMOUTH

State

MN

Zip Code

55442-1548

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHENEY CARPET

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.8838

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. GLEN L COOK

Mailing Address 8041 COUNTY ROAD 78

City

LAKE SHORE

State

MN

Zip Code

56468-2532

FEC ID number of contributing
federal political committee.

C

Name of Employer

GUESTS INC

Occupation

SELF-EMPLOYED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

Transaction ID : SA11AI.8466

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MICHAEL COURY

Mailing Address 1640 DIANE ROAD

City

MENDOTA HEIGHTS

State

MN

Zip Code

55118

FEC ID number of contributing
federal political committee.

C

Name of Employer

COURY CARTAGE

Occupation

TRUCK DRIVER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2016

Transaction ID : SA11AI.9003

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MERRILL CRAGUN

A.

Mailing Address 11000 CRAGUNS DRIVE

City

BRAINERD

State

MN

Zip Code

56401-2020

FEC ID number of contributing
federal political committee.

C

Name of Employer
CRAGUN'S LODGEOccupation
LODGE OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2016

Transaction ID : SA11AI.7606

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MOLLY CRONIN

B.

Mailing Address 31 LOOPER CIR

City

EDINA

State

MN

Zip Code

55436

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.7201

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WILLIAM DIRCKS

C.

Mailing Address 100 THIRD AVE S, 3202

City

MINNEAPOLIS

State

MN

Zip Code

55401-2728

FEC ID number of contributing
federal political committee.

C

Name of Employer
BERGER TRANSFEROccupation
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2016

Transaction ID : SA11AI.7389

Amount of Each Receipt this Period

2700.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3600.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

TERRANCE DOLAN**A.**

Mailing Address PO BOX 2441, 110 S 8TH ST

City

MINNEAPOLIS

State

MN

Zip Code

55402

FEC ID number of contributing
federal political committee.

C

Name of Employer

U.S. BANCORP

Occupation

FINANCE/BANKING

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2016

Transaction ID : SA11AI.8628

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WAYNE DONDELINGER**B.**

Mailing Address 2310 PAUL BUNYAN DRIVE NW

City

BEMIDJI

State

MN

Zip Code

56601

FEC ID number of contributing
federal political committee.

C

Name of Employer

DONDELINGER GM

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.7914

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. WARD A ERICKSON**C.**

Mailing Address 19700 WATERFORD COURT

City

SHOREWOOD

State

MN

Zip Code

55331-7027

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2016

Transaction ID : SA11AI.7553

Amount of Each Receipt this Period

200.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3150.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

PATRICK FARLEY

A.

Mailing Address 7149 BALLARD TRAIL

City

INVER GROVE

State

MN

Zip Code

55077-4447

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2016

Transaction ID : SA11AI.7276

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROBERT FAYFIELD

B.

Mailing Address P.O. BOX 34

City

MINNEAPOLIS

State

MN

Zip Code

55440

FEC ID number of contributing
federal political committee.

C

Name of Employer

BANNER ENGINEERING

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : SA11AI.9678

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TODD FERRARA

C.

Mailing Address 3825 UPTON AVE S

City

MINNEAPOLIS

State

MN

Zip Code

55410-1240

FEC ID number of contributing
federal political committee.

C

Name of Employer

STANDARD HEATING & AC

Occupation

CO-OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.7187

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

KATHERINE D. FIELDER

Mailing Address 1896 397TH AVENUE NE

City

STANCHFIELD

State

MN

Zip Code

55080

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

REALTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2016

Transaction ID : SA11AI.8213

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WALTER FISCHER

Mailing Address 4011 MCCULLOCH STR.

City

DULUTH

State

MN

Zip Code

55804-1930

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2016

Transaction ID : SA11AI.9274

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JULIE FRANKLIN

Mailing Address 13429 COUNTY ROAD 7 NW

City

CLEARWATER

State

MN

Zip Code

55320-2202

FEC ID number of contributing
federal political committee.

C

Name of Employer

ST. MICHAEL DENTAL

Occupation

DENTAL ASSISTANT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2016

Transaction ID : SA11AI.8511

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MR. KEITH A FRANKLIN

Mailing Address 13429 COUNTY ROAD 7 NORTHWEST

City

CLEARWATER

State

MN

Zip Code

55320

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRANKLIN OUTDOOR ADV.

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.7147

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KELLY GRIFFIN

Mailing Address 168 HARDMAN AVE. SOUTH

City

SOUTH ST. PAUL

State

MN

Zip Code

55075

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCCARTHY-DUCE SALES

Occupation

SALES

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : SA11AI.7508

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MARY E GRUBB

Mailing Address 4901 WOODLAWN STREET

City

DULUTH

State

MN

Zip Code

55804-1181

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2016

Transaction ID : SA11AI.9784

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

PETER GUNAS**A.**

Mailing Address 2105 S RANDOLPH STREET

City

ARLINGTON

State

VA

Zip Code

22204

FEC ID number of contributing
federal political committee.

C

Name of Employer

INVESTMENT COMPANY INSTITUTE

Occupation

GOVERNMENT AFFAIR OFFICER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

Transaction ID : SA11AI.9364

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MS. BECKY HALL**B.**

Mailing Address 4760 LONDON ROAD

City

DULUTH

State

MN

Zip Code

55804

FEC ID number of contributing
federal political committee.

C

Name of Employer

DULUTHS CITY COUNCIL

Occupation

CANDIDATE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

Transaction ID : SA11AI.8590

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHRIS HANNEKEN**C.**

Mailing Address P.O. BOX 367

City

PINE RIVER

State

MN

Zip Code

56474

FEC ID number of contributing
federal political committee.

C

Name of Employer

HANNEKEN INSURANCE AGENCY

Occupation

INSURANCE AGENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : SA11AI.8771

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MR. MARK D HANSON

Mailing Address 12987 PIONEER TRAIL

City

EDEN PRAIRIE

State

MN

Zip Code

55347-4109

FEC ID number of contributing
federal political committee.

C

Name of Employer

SEAFOAM SALES

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

Transaction ID : SA11AI.8648

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. MIKE HARLON

Mailing Address 1391 FINCH LANE

City

GREEN BAY

State

WI

Zip Code

54313

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2016

Transaction ID : SA11AI.9624

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WAYNE R HASBARGEN

Mailing Address 318 SHOREWOOD DRIVE

City

INTERNATIONAL FALLS

State

MN

Zip Code

56649-2109

FEC ID number of contributing
federal political committee.

C

Name of Employer

RAINY RIVER VET. HOSPITAL

Occupation

VETERINARIAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2016

Transaction ID : SA11AI.9559

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MR. GLENN HASLERUD

Mailing Address 4500 CAMBRIDGE STREET 154

City

DULUTH

State

MN

Zip Code

55804

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2016

Transaction ID : SA11AI.8223

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. GLENN HASLERUD

Mailing Address 4500 CAMBRIDGE STREET 154

City

DULUTH

State

MN

Zip Code

55804

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : SA11AI.8721

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. GERALD J HOMMES

Mailing Address 6180 LANEWOOD LANE

City

PLYMOUTH

State

MN

Zip Code

55446-4543

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		13		2016

Transaction ID : SA11AI.8305

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

KARIN HOUSLEY

A.

Mailing Address 2877 ITASCA AVENUE S

City

LAKELAND

State

MN

Zip Code

55043-9742

FEC ID number of contributing
federal political committee.

C

Name of Employer

STATE OF MINNESOTA

Occupation

STATE SENATOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		09		2016

Transaction ID : SA11AI.8330

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LORRAINE P. JAMAR

B.

Mailing Address 307 HIGHLAND DRIVE

City

HIBBING

State

MN

Zip Code

55746-2325

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2016

Transaction ID : SA11AI.9295

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MICHAEL JOHNSON

C.

Mailing Address 747 SUNSET LANE

City

MORA

State

MN

Zip Code

55051-1858

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2016

Transaction ID : SA11AI.7354

Amount of Each Receipt this Period

55.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1555.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 24 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MR. ROBERT E KEPPEL

A.

Mailing Address 5045 PARK TER

City

EDINA

State

MN

Zip Code

55436-1098

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.8926

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROBERT KIERLIN

B.

Mailing Address P.O. BOX 302

City

WINONA

State

MN

Zip Code

55987

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2016

Transaction ID : SA11AI.7547

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DAN KIRBY

C.

Mailing Address 2 RIVERVIEW HTS.

City

SIOUX FALLS

State

SD

Zip Code

57105

FEC ID number of contributing
federal political committee.

C

Name of Employer

KIRBY FINANCIAL, LLC

Occupation

INVESTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2016

Transaction ID : SA11AI.7177

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

RONALD KIRSCHT

Mailing Address 7750 COUNTY RD 6 NW

City

GARFIELD

State

MN

Zip Code

56332-8111

FEC ID number of contributing
federal political committee.

C

Name of Employer

DONELLY CUSTOM MANUFACTURING

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

Transaction ID : SA11AI.8830

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BARBARA G. KLETSCHKA

Mailing Address 1925 NOBLE DRIVE N

City

MINNEAPOLIS

State

MN

Zip Code

55422

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2016

Transaction ID : SA11AI.7402

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BARBARA G. KLETSCHKA

Mailing Address 1925 NOBLE DRIVE N

City

MINNEAPOLIS

State

MN

Zip Code

55422

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2016

Transaction ID : SA11AI.8019

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

400.00

×	11a	11b	11c	11d	
	12	13a	13b	14	15

NAME OF COMMITTEE (In Full)
FRIENDS OF STEWART MILLS

A diagram of a rectangular frame structure. It consists of two horizontal bars at the top and bottom, and ten vertical bars connecting them. The vertical bars are evenly spaced along the horizontal bars.

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 27 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

BARBARA G. KOCH**A.**

Mailing Address 505 NORTH HIGHWAY 169, SUITE 595

City

PLYMOUTH

State

MN

Zip Code

55441

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

Transaction ID : SA11AI.8548

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WILLIAM KOETZLE**B.**

Mailing Address PO BOX 6046

City

SAN RAMON

State

CA

Zip Code

94583

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

Transaction ID : SA11AI.9101

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KEITH KOSTUCH**C.**

Mailing Address 4511 LAKEVIEW DRIVE

City

EDINA

State

MN

Zip Code

55424-1517

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2016

Transaction ID : SA11AI.8323

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 28 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

SEAN KRAMER

A.

Mailing Address 30477 COUNTY RD 3

City

MERRIFIELD

State

MN

Zip Code

56465-4380

FEC ID number of contributing
federal political committee.

C

Name of Employer

ELEMENT PAYMENT SERVICES

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.7151

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RICHARD LACHER

B.

Mailing Address 57565 COUNTY RD 29

City

NORTHOME

State

MN

Zip Code

56661

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2016

Transaction ID : SA11AI.8361

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CRAIG LEIPOLD

C.

Mailing Address 5333 WIND POINT ROAD

City

RACINE

State

WI

Zip Code

53402-2322

FEC ID number of contributing
federal political committee.

C

Name of Employer

MINNESOTA WILD

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

Transaction ID : SA11AI.9613

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 29 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MICHAEL LEJEUNE

Mailing Address 480 OLD LONG LAKE ROAD

City

WAYZATA

State

MN

Zip Code

55391-9681

FEC ID number of contributing
federal political committee.

C

Name of Employer
FABCON PRECASTOccupation
CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2016

Transaction ID : SA11AI.9735

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BRUCE C LESTICO

Mailing Address 1324 ISLEVIEW ROAD

City

GRAND RAPIDS

State

MN

Zip Code

55744-9781

FEC ID number of contributing
federal political committee.

C

Name of Employer
AUTOMOTIVE ELECTRIC SERVICES, INC.Occupation
OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : SA11AI.9691

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PHILIP LINDAU JR.

Mailing Address 2825 MEDICINE RIDGE RD

City

PLYMOUTH

State

MN

Zip Code

55441-3259

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMMODITY SPECIALISTSOccupation
PARTNER/MANAGER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2016

Transaction ID : SA11AI.8356

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SEE REATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

3100.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 30 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

PHILIP LINDAU JR.

A.

Mailing Address 2825 MEDICINE RIDGE RD

City

PLYMOUTH

State

MN

Zip Code

55441-3259

FEC ID number of contributing
federal political committee.

C

Name of Employer

COMMODITY SPECIALISTS

Occupation

PARTNER/MANAGER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		30		2016

Transaction ID : SA11AI.8356.0

Amount of Each Receipt this Period

-2300.00

☒ Memo Item

REATTRIBUTION TO SPOUSE

Full Name (Last, First, Middle Initial)

SHARON LINDAU

B.

Mailing Address 2825 MEDICINE RIDGE RD

City

PLYMOUTH

State

MN

Zip Code

55441-3259

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		30		2016

Transaction ID : SA11AI.8356.1

Amount of Each Receipt this Period

2300.00

☒ Memo Item

REATTRIBUTION FROM SPOUSE

Full Name (Last, First, Middle Initial)

FRED K LITTLE

C.

Mailing Address 426 BROADWAY

City

CLOQUET

State

MN

Zip Code

55720-1749

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		22		2016

Transaction ID : SA11AI.9073

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
FRIENDS OF STEWART MILLS

A. Full Name (Last, First, Middle Initial)
FRED K LITTLE

Mailing Address 426 BROADWAY

City State Zip Code
CLOQUET MN 55720-1749

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
02	22	2016

Transaction ID : SA11AI.9350

Amount of Each Receipt this Period

100.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
WHITNEY MACMILLAN JR.

Mailing Address P.O. BOX 5628, DEPT 28

City State Zip Code
MINNEAPOLIS MN 55440-5628

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	09	2016

Transaction ID : SA11AI.8530

Amount of Each Receipt this Period

2700.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
DANNO MAHONEY

Mailing Address P.O. BOX 9

City State Zip Code
DEERWOOD MN 56444

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	08	2016

Transaction ID : SA11AI.9488

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3050.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 32 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

JOSEPH P MARNELL

A.

Mailing Address 600 S 2ND STREET, APT 704

City

MINNEAPOLIS

State

MN

Zip Code

55401-2175

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALLINA

Occupation

MEDICAL DOCTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2016

Transaction ID : SA11AI.8435

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DANIEL MARRIN

B.

Mailing Address 31807 LINDOVE LANE

City

PEQUOT LAKES

State

MN

Zip Code

56472-3851

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.9545

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. ROBERT S MARS JR.

C.

Mailing Address 4114 LONDON ROAD

City

DULUTH

State

MN

Zip Code

55804-2245

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : SA11AI.9475

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

ROBERT MARVIN

Mailing Address 914 E LAKE STREET

City

WARROAD

State

MN

Zip Code

56763

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.7511

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PATRICIA W MAST

Mailing Address 2329 FREDERICK STREET

City

DULUTH

State

MN

Zip Code

55803-1410

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		21		2016

Transaction ID : SA11AI.7439

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PATRICIA W MAST

Mailing Address 2329 FREDERICK STREET

City

DULUTH

State

MN

Zip Code

55803-1410

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2016

Transaction ID : SA11AI.7344

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1550.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 34 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MR. ALVIN E MCQUINN

Mailing Address 1551 GULF SHORE BLVD S

City

NAPLES

State

FL

Zip Code

34102-7454

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

INVESTMENTS MANAGER

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2016

Transaction ID : SA11AI.9297

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MARY MELLGREN-CROUSE

Mailing Address 143 14TH AVENUE SE

City

FOREST LAKE

State

MN

Zip Code

55025-1985

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2016

Transaction ID : SA11AI.7235

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DANIEL MEYER

Mailing Address 2506 DUXBURY PLACE

City

ALEXANDRIA

State

VA

Zip Code

22308

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE DUBERSTEIN GROUP, INC.

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

Transaction ID : SA11AI.9372

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3255.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 35 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MR. HENRY CHARLES MILLS**A.**

Mailing Address P.O. BOX 2373

City

APPLETON

State

WI

Zip Code

54912-2373

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIVELY AUTO COMPANY

Occupation

VP

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		24		2016

Transaction ID : SA11AI.9974

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. TRAVIS D MILLS**B.**

Mailing Address 1410 MORaine DR

City

VAIL

State

CO

Zip Code

81657-4981

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

SALES

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		05		2016

Transaction ID : SA11AI.8109

Amount of Each Receipt this Period

5400.00

☐ Memo Item

SEE REDESIGNATION

Full Name (Last, First, Middle Initial)

MR. TRAVIS D MILLS**C.**

Mailing Address 1410 MORaine DR

City

VAIL

State

CO

Zip Code

81657-4981

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

SALES

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		05		2016

Transaction ID : SA11AI.8109.0

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

8100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial) MR. TRAVIS D MILLS		Date of Receipt M M / D D / Y Y Y Y 01 / 05 / 2016
Mailing Address 1410 MORaine DR		Transaction ID : SA11AI.8109.1
City VAIl	State CO	Zip Code 81657-4981
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer SELF EMPLOYED	Occupation SALES	<input checked="" type="checkbox"/> Memo Item REDESIGNATION FROM PRIMARY
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) JOHN R. MINER		Date of Receipt M M / D D / Y Y Y Y 02 / 29 / 2016
Mailing Address 4912 WOODLAND AVENUE		Transaction ID : SA11AI.9423
City DULUTH	State MN	Zip Code 55803
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer MINERS INC.	Occupation BAKER	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) ELLIS F NAEGELE		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2016
Mailing Address 7993 VIA VECCHIA		Transaction ID : SA11AI.8839
City NAPLES	State FL	Zip Code 34108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MR. ROBERT O. NAEGELE JR.

Mailing Address 7993 VIA VECCHIA

City

NAPLES

State

FL

Zip Code

34108-7531

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.8840

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ARDITH M NELSON

Mailing Address 3595 75TH STREET

City

SWANVILLE

State

MN

Zip Code

56382-3712

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2016

Transaction ID : SA11AI.7241

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GARY NEUSINGER

Mailing Address 5015 36TH AVENUE SOUTH

City

MINNEAPOLIS

State

MN

Zip Code

55417

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2016

Transaction ID : SA11AI.7430

Amount of Each Receipt this Period

225.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

675.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 38 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

GARY L. OIE

A.

Mailing Address 1739 ROWE PLACE

City

SAINT PAUL

State

MN

Zip Code

55106

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

Transaction ID : SA11AI.8655

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. DONALD G OREN

B.

Mailing Address 3105 SANDY HOOK DRIVE

City

ROSEVILLE

State

MN

Zip Code

55113-2128

FEC ID number of contributing
federal political committee.

C

Name of Employer

DART TRANSIT COMPANY

Occupation

CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2016

Transaction ID : SA11AI.8000

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MARK R. PARENTEAU

C.

Mailing Address 9408 PARENTEAU DRIVE

City

ZIM

State

MN

Zip Code

55738

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2016

Transaction ID : SA11AI.8503

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 97

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

IRENE M PARKERMailing Address 510 2ND STREET NORTHWEST
APARTMENT 105

City	State	Zip Code
BIG FALLS	MN	56627-9719

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : SA11AI.9614

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GREGG PETERSON

Mailing Address 250 PEAVEY LN

City	State	Zip Code
WAYZATA	MN	55391-1523

FEC ID number of contributing
federal political committee.

C

Name of Employer
NASCENT CAPITALOccupation
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2016

Transaction ID : SA11AI.9743

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. RICHARD POGIN

Mailing Address 14853 WILDS PKWY NW

City	State	Zip Code
PRIOR LAKE	MN	55372

FEC ID number of contributing
federal political committee.

C

Name of Employer
INVESTMENT MANAGEMENT INCOccupation
CFO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.7191

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 97
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial) RUTH QUISBERG			Date of Receipt M M / D D / Y Y Y Y Y 03 / 29 / 2016	
Mailing Address 1523 SUNSET VIEW			Transaction ID : SA11AI.9952	
City BRAINERD	State MN	Zip Code 56401-3074	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer HOMEMAKER		Occupation HOMEMAKER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2400.00		

Full Name (Last, First, Middle Initial) THOMAS RAMSEY			Date of Receipt M M / D D / Y Y Y Y Y 01 / 19 / 2016	
Mailing Address 1434 W CULLOM AVE			Transaction ID : SA11AI.7382	
City CHICAGO	State IL	Zip Code 60613-1310	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer TOM M RAMSEY THE MAIN RESOURCE		Occupation CONSULTANT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) MR. WILLIAM C RANDALL			Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2016	
Mailing Address 10303 ORCHID LANE			Transaction ID : SA11AI.9799	
City PINE RIVER	State MN	Zip Code 56474-2620	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 350.00		

SUBTOTAL of Receipts This Page (optional).....			550.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

JOHN D REMICK

Mailing Address 3232 FOX HOLLOW COURT SW

City

ROCHESTER

State

MN

Zip Code

55902-6600

FEC ID number of contributing
federal political committee.

C

Name of Employer

ROCHESTER ATHLETIC CLUB

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2016

Transaction ID : SA11AI.9942

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. ALLEN RENSTROM

Mailing Address 44426 348TH LANE

City

AITKIN

State

MN

Zip Code

56431-5051

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : SA11AI.9696

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MS. KATHRYN ROMINISKI

Mailing Address 2301 RIVER RD SO

City

LAKELAND

State

MN

Zip Code

55043

FEC ID number of contributing
federal political committee.

C

Name of Employer

HUBBARD BROADCASTING

Occupation

EXECUTIVE VICE PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.7142

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 42 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MARIE ROSE

A.

Mailing Address 6006 84TH ST SW

City

MOTLEY

State

MN

Zip Code

56466-2128

FEC ID number of contributing
federal political committee.

C

Name of Employer

ROSE CD

Occupation

LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2016

Transaction ID : SA11AI.8306

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JILL ROWLISON

B.

Mailing Address 5306 ALBEMARLE STREET

City

BETHESDA

State

MD

Zip Code

20816

FEC ID number of contributing
federal political committee.

C

Name of Employer

DOW CHEMICAL

Occupation

DIRECTOR OF GOVERNMENT AFFAIRS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

Transaction ID : SA11AI.9437

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. PATRICK RYAN

C.

Mailing Address 105 CLAY CLIFFS DR.

City

TONKA BAY

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer

RYAN COMPANIES

Occupation

CONSTRUCTION/REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : SA11AI.9761

Amount of Each Receipt this Period

2700.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 43 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

BRIAN SATTLER

Mailing Address 902 WILD ROSE COURT

City

EAGAN

State

MN

Zip Code

55123

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE SCHWAN FOOD COMPANY

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2016

Transaction ID : SA11AI.9849

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STEVE SCHEEL

Mailing Address 3900 RIVER OAK CIRCLE

City

MOORHEAD

State

MN

Zip Code

56560

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCHEELS

Occupation

RETAIL

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2016

Transaction ID : SA11AI.9263

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BRON SCHERER

Mailing Address 617 TURNBERRY CT

City

NORTHFIELD

State

MN

Zip Code

55057

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

CPA

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2016

Transaction ID : SA11AI.9733

Amount of Each Receipt this Period

1350.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 44 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

WILLIAM SCHNELL

A.

Mailing Address 2708 BRANCH STREET

City

DULUTH

State

MN

Zip Code

55812-2335

FEC ID number of contributing
federal political committee.

C

Name of Employer

ORTHOPEDIC ASSOCIATES OF DULUTH

Occupation

DOCTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2016

Transaction ID : SA11AI.8632

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. DOUGLAS P. SEATON

B.

Mailing Address 7300 METRO BOULEVARD SUI

City

MINNEAPOLIS

State

MN

Zip Code

55439-2308

FEC ID number of contributing
federal political committee.

C

Name of Employer

SEATON BECK & PETERS

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		07		2016

Transaction ID : SA11AI.8393

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NEIL SKOGERBOE

C.

Mailing Address 6620 BIRCHMONT BEACH ROAD NE

City

BEMIDJI

State

MN

Zip Code

56601-7601

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.9805

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 45 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MR. GUY J SMITH

Mailing Address W5554 BLACKFRIAR RD

City

BLACK CREEK

State

WI

Zip Code

54106-8480

FEC ID number of contributing
federal political committee.

C

Name of Employer

SUBURBAN ELECTRICAL ENGINEERS/CONT

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

10800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		16		2016

Transaction ID : SA11AI.8013

Amount of Each Receipt this Period

9800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. GUY J SMITH

Mailing Address W5554 BLACKFRIAR RD

City

BLACK CREEK

State

WI

Zip Code

54106-8480

FEC ID number of contributing
federal political committee.

C

Name of Employer

SUBURBAN ELECTRICAL ENGINEERS/CONT

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		16		2016

Transaction ID : SA11AI.8013.0

Amount of Each Receipt this Period

-5400.00

☒ Memo Item

REATTRIBUTION TO SPOUSE

Full Name (Last, First, Middle Initial)

MRS. KAREN R SMITH

Mailing Address W5554 BLACKFRIAR RD

City

BLACK CREEK

State

WI

Zip Code

54106-8480

FEC ID number of contributing
federal political committee.

C

Name of Employer

COMMUNITY SERVICE

Occupation

RN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		16		2016

Transaction ID : SA11AI.8013.1

Amount of Each Receipt this Period

5400.00

☒ Memo ItemREATTRIBUTION FROM SPOUSE; SEE
REDESIGNATION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

9800.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 46 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MRS. KAREN R SMITH

Mailing Address W5554 BLACKFRIAR RD

City

BLACK CREEK

State

WI

Zip Code

54106-8480

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMMUNITY SERVICEOccupation
RN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		16		2016

Transaction ID : SA11AI.8013.2

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial)

MRS. KAREN R SMITH

Mailing Address W5554 BLACKFRIAR RD

City

BLACK CREEK

State

WI

Zip Code

54106-8480

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMMUNITY SERVICEOccupation
RN

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		16		2016

Transaction ID : SA11AI.8013.3

Amount of Each Receipt this Period

2700.00

☒ Memo Item

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

MR. GUY J SMITH

Mailing Address W5554 BLACKFRIAR RD

City

BLACK CREEK

State

WI

Zip Code

54106-8480

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUBURBAN ELECTRICAL ENGINEERS/CONTOccupation
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		16		2016

Transaction ID : SA11AI.8013.4

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 47 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MR. GUY J SMITH

Mailing Address W5554 BLACKFRIAR RD

City

BLACK CREEK

State

WI

Zip Code

54106-8480

FEC ID number of contributing
federal political committee.

C

Name of Employer

SUBURBAN ELECTRICAL ENGINEERS/CONT

Occupation

EXECUTIVE

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2016

Transaction ID : SA11AI.8013.5

Amount of Each Receipt this Period

2700.00

☒ Memo Item

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

JOY SNYDER

Mailing Address 8328 JOHNSON CIRCLE

City

BLOOMINGTON

State

MN

Zip Code

55437-1216

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2016

Transaction ID : SA11AI.9513

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHARLES SPRADO

Mailing Address 13434 N GRINDSTONE RD

City

SANDSTONE

State

MN

Zip Code

55072-2687

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2016

Transaction ID : SA11AI.8261

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

375.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

THOMAS STAUBER

A.

Mailing Address 3700 NORTH CHESTNUT STREE

City

CHASKA

State

MN

Zip Code

55318-3068

FEC ID number of contributing
federal political committee.

C

Name of Employer

EDWARDS SALES CORP.

Occupation

SALES

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.7186

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROBERT STREATER

B.

Mailing Address 38928 10TH AVE

City

NORTH BRANCH

State

MN

Zip Code

55056-6653

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROGRESSIVE LIVING SOLUTIONS, INC.

Occupation

MANAGER/OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2016

Transaction ID : SA11AI.9200

Amount of Each Receipt this Period

900.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JONI STUTZMAN

C.

Mailing Address 237 KENNEDY MEN DRIVE

City

HOYT LAKES

State

MN

Zip Code

55750

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOYT LAKES IGA

Occupation

RETAIL GROCER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2016

Transaction ID : SA11AI.8599

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2150.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 49 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

ROBERT SULLIVAN

A.

Mailing Address 7818 EXCELSIOR ROAD

City

BAXTER

State

MN

Zip Code

56425

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2016

Transaction ID : SA11AI.7598

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHARLES TEST

B.

Mailing Address 2710 - 2ND AVE S

City

MINNEAPOLIS

State

MN

Zip Code

55408-1710

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

Transaction ID : SA11AI.9887

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. THEO A THIELEN

C.

Mailing Address 509 - 8TH ST W

City

PARK RAPIDS

State

MN

Zip Code

56470-1375

FEC ID number of contributing
federal political committee.

C

Name of Employer

THIELEN MOTORS

Occupation

AUTO SELLER OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2016

Transaction ID : SA11AI.9175

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 97

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

KURT W. THOMPSON**A.**

Mailing Address 37919 BLUERIDGE DRIVE

City

GRAND RAPIDS

State

MN

Zip Code

55744

FEC ID number of contributing
federal political committee.

C

Name of Employer

THOMPSON TOOL&DIE

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		16		2016

Transaction ID : SA11AI.8195

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BRIAN THURINGER**B.**

Mailing Address 11125 BIRCH ISLAND ROAD

City

BRAINERD

State

MN

Zip Code

56401

FEC ID number of contributing
federal political committee.

C

Name of Employer

MADDEN BROS, INC.

Occupation

OWNER/GM

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2016

Transaction ID : SA11AI.8938

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MICHAEL J. WALT**C.**

Mailing Address 2661 ELDRIDGE AVENUE E

City

NORTH ST. PAUL

State

MN

Zip Code

55109

FEC ID number of contributing
federal political committee.

C

Name of Employer

3M

Occupation

CLINICAL RESEARCH

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

Transaction ID : SA11AI.9410

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1350.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MR. JAMES WERLER

Mailing Address 4809 PLEASANT AVENUE

City

MINNEAPOLIS

State

MN

Zip Code

55419-5440

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHEMSTAR PRODUCTS CO.

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2016

Transaction ID : SA11AI.9620

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. TOM WETROSKY

Mailing Address 25117 NORWAY LANE

City

NISSWA

State

MN

Zip Code

56468

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2016

Transaction ID : SA11AI.9580

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RICHARD WHITE

Mailing Address 34383 SIPE ROAD

City

GRAND RAPIDS

State

MN

Zip Code

55744-4715

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2016

Transaction ID : SA11AI.7351

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 52 OF 97

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

PATRICK J. WIEBUSCH

A.

Mailing Address PO BOX 184

City

BRAINERD

State

MN

Zip Code

56401

FEC ID number of contributing
federal political committee.

C

Name of Employer

REMAX REALTY

Occupation

REAL ESTATE AGENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		04		2016

Transaction ID : SA11AI.8337

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KAREN L WINEY

B.

Mailing Address 3 BLACK OAK ROAD

City

NORTH OAKS

State

MN

Zip Code

55127-6230

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2016

Transaction ID : SA11AI.8053

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CLARK J. WINSLOW

C.

Mailing Address 337 VELVEDERE AVENUE

City

BELVEDERE

State

CA

Zip Code

94920

FEC ID number of contributing
federal political committee.

C

Name of Employer

WINSLOW CAPITAL

Occupation

INVESTMENTS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		28		2016

Transaction ID : SA11AI.9026

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1650.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF STEWART MILLS

A. Full Name (Last, First, Middle Initial) PETER WOOD		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2016	
Mailing Address 7102 HWY 53		Transaction ID : SA11AI.9622	
City CANYON	State MN	Zip Code 55717-8720	Amount of Each Receipt this Period 444.44
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer SELF	Occupation LOGGER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 444.44		

B. Full Name (Last, First, Middle Initial) DALE ZOERB		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2016	
Mailing Address 2621 WEXFORD HEIGHTS LANE		Transaction ID : SA11AI.8846	
City NEW BRIGHTON	State MN	Zip Code 55112	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer BUILDING RESTORATION	Occupation PRESIDENT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

C. Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	2444.44
TOTAL This Period (last page this line number only).....	98124.44

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 54 OF 97

(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

AMERICAN RENTAL ASSOCIATION POLITICAL ACTION COMMITTEE (ARAPAC)

A.

Mailing Address 1900-19TH STREET

City

MOLINE

State

IL

Zip Code

61265

FEC ID number of contributing
federal political committee.

C C00107615

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2016

Transaction ID : SA11C.8638

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CONSERVATIVE OPPURTUNITY LEADERSHIP AND ENTERPRISE PAC (COLE PAC)

B.

Mailing Address 12176 CHANCERY STATION CIRCLE

City

RESTON

State

VA

Zip Code

20190

FEC ID number of contributing
federal political committee.

C C00404392

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	29	/	2016

Transaction ID : SA11C.9368

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

EMMER FOR CONGRESS

C.

Mailing Address PO BOX 998

City

ANOKA

State

MN

Zip Code

55303

FEC ID number of contributing
federal political committee.

C C00545749

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA11C.8848

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

FIRST IN FREEDOM PAC

A.

Mailing Address 228 S. WASHINGTON ST., STE. 115

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00540146

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : SA11C.9664

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FREEDOM AND SECURITY PAC

B.

Mailing Address 228 S. WASHINGTON ST., STE. 115

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00437061

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2016

Transaction ID : SA11C.9374

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FREEDOM CLUB FEDERAL PAC

C.

Mailing Address P. O. BOX 416

City

CHAMPLIN

State

MN

Zip Code

55316

FEC ID number of contributing
federal political committee.

C C00307777

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2016

Transaction ID : SA11C.8334

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

10000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
FRIENDS OF STEWART MILLS**A.** Full Name (Last, First, Middle Initial)
FREEDOM CLUB FEDERAL PAC

Mailing Address P. O. BOX 416

City	State	Zip Code
CHAMPLIN	MN	55316

FEC ID number of contributing
federal political committee.**C** C00307777

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2016

Transaction ID : SA11C.9343

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)
ICE PAC

Mailing Address PO BOX 752

City	State	Zip Code
LONG LAKE	MN	55356

FEC ID number of contributing
federal political committee.**C** C00484667

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA11C.8849

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)Mailing Address 600 14TH STREET, NW
SUITE 800

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing
federal political committee.**C** C00236489

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : SA11C.8842

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....

11000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MARTHA PAC

Mailing Address 1006 PENDLETON STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00527309

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11C.7910

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NEW PIONEERS PAC

Mailing Address 228 S WASHINGTON ST STE 115

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00459123

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : SA11C.9729

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 2485

City

SPRINGFIELD

State

VA

Zip Code

22152

FEC ID number of contributing
federal political committee.

C C00467431

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11C.8836

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

8500.00

TOTAL This Period (last page this line number only).....

34500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

MR. STEWART MILLS

Mailing Address PO BOX 1039

City

BRAINERD

State

MN

Zip Code

56401

FEC ID number of contributing
federal political committee.**C** H4MN08083

Name of Employer

FRIENDS OF STEWART MILLS

Occupation

CANDIDATE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

9726.67

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		01		2016

Transaction ID : SA11D.10057

Amount of Each Receipt this Period

4326.67

☐ Memo Item

IN-KIND: RENT

Full Name (Last, First, Middle Initial)

MR. STEWART MILLS

Mailing Address PO BOX 1039

City

BRAINERD

State

MN

Zip Code

56401

FEC ID number of contributing
federal political committee.**C** H4MN08083

Name of Employer

FRIENDS OF STEWART MILLS

Occupation

CANDIDATE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

10351.67

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		01		2016

Transaction ID : SA11D.10058

Amount of Each Receipt this Period

625.00

☐ Memo Item

IN-KIND: VIDEO PRODUCTION SERVICES

Full Name (Last, First, Middle Initial)

MR. STEWART MILLS

Mailing Address PO BOX 1039

City

BRAINERD

State

MN

Zip Code

56401

FEC ID number of contributing
federal political committee.**C** H4MN08083

Name of Employer

FRIENDS OF STEWART MILLS

Occupation

CANDIDATE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

14678.34

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		03		2016

Transaction ID : SA11D.10061

Amount of Each Receipt this Period

4326.67

☐ Memo Item

IN-KIND: RENT

SUBTOTAL of Receipts This Page (optional).....

9278.34

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF STEWART MILLS

A. Full Name (Last, First, Middle Initial) MR. STEWART MILLS		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2016	
Mailing Address PO BOX 1039		Transaction ID : SA11D.10062	
City BRAINERD	State MN	Zip Code 56401	Amount of Each Receipt this Period 4326.67 <input type="checkbox"/> Memo Item IN-KIND: RENT
FEC ID number of contributing federal political committee. C H4MN08083			
Name of Employer FRIENDS OF STEWART MILLS	Occupation CANDIDATE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 19005.01		

B. Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period <input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

C. Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period <input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	4326.67
TOTAL This Period (last page this line number only).....	13605.01

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. APG MEDIA OF MINNESOTA

Mailing Address 29088 AIRPARK DR.

City	State	Zip Code
EASTON	MD	21601

Purpose of Disbursement
PRINT ADVERTISING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2016

Amount of Each Disbursement this Period

1400.00

☐ Memo Item

Transaction ID : SB17.7012

B. ASPECT CONSULTING, LLCMailing Address 8401 EXCELSIOR DRIVE
SUITE 103

City	State	Zip Code
MADISON	WI	53717

Purpose of Disbursement
BATCHING & CAGING SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		11		2016

Amount of Each Disbursement this Period

306.60

☐ Memo Item

Transaction ID : SB17.7013

C. ASPECT CONSULTING, LLCMailing Address 8401 EXCELSIOR DRIVE
SUITE 103

City	State	Zip Code
MADISON	WI	53717

Purpose of Disbursement
BATCHING & CAGING SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2016

Amount of Each Disbursement this Period

114.00

☐ Memo Item

Transaction ID : SB17.7014

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1820.60

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. ASPECT CONSULTING, LLCMailing Address 8401 EXCELSIOR DRIVE
SUITE 103

City MADISON State WI Zip Code 53717

Purpose of Disbursement
BATCHING & CAGING SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		14		2016

Amount of Each Disbursement this Period

66.00

☐ Memo Item

Transaction ID : SB17.7015

B. ALEXANDRA BOETTCHER

Mailing Address PO BOX 1039

City BRAINERD State MN Zip Code 56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2016

Amount of Each Disbursement this Period

1099.67

☐ Memo Item

Transaction ID : SB17.7039

C. ALEXANDRA BOETTCHER

Mailing Address PO BOX 1039

City BRAINERD State MN Zip Code 56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2016

Amount of Each Disbursement this Period

1099.66

☐ Memo Item

Transaction ID : SB17.7043

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2265.33

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. ALEXANDRA BOETTCHER

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 03 / 2016

Amount of Each Disbursement this Period

1099.67

☐ Memo Item

Transaction ID : SB17.7047

B. ALEXANDRA BOETTCHER

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 17 / 2016

Amount of Each Disbursement this Period

1099.66

☐ Memo Item

Transaction ID : SB17.7052

C. ALEXANDRA BOETTCHER

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 02 / 2016

Amount of Each Disbursement this Period

1099.67

☐ Memo Item

Transaction ID : SB17.7056

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3299.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. ALEXANDRA BOETTCHER

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

1099.66

☐ Memo Item

Transaction ID : SB17.7061

B. ALEXANDRA BOETTCHER

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2016

Amount of Each Disbursement this Period

1099.67

☐ Memo Item

Transaction ID : SB17.7065

C. BURCHFIELD ENTERPRISESMailing Address 633 WEST WILSON STREET
#419

City	State	Zip Code
MADISON	WI	53703

Purpose of Disbursement
DATA CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2016

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Transaction ID : SB17.7019

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3699.33

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. BURCHFIELD ENTERPRISESMailing Address 633 WEST WILSON STREET
#419

City MADISON State WI Zip Code 53703

Purpose of Disbursement
DATA CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		09		2016

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Transaction ID : SB17.7020

B. CONNECTIVIST MEDIAMailing Address 544 E. OGDEN AVENUE
SUITE 700-161

City MILWAUKEE State WI Zip Code 53202

Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		09		2016

Amount of Each Disbursement this Period

12957.00

☐ Memo Item

Transaction ID : SB17.7021

C. JOHN ELORANTA

Mailing Address PO BOX 1039

City BRAINERD State MN Zip Code 56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2016

Amount of Each Disbursement this Period

1233.93

☐ Memo Item

Transaction ID : SB17.7040

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

17190.93

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. JOHN ELORANTA

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2016

Amount of Each Disbursement this Period

1233.95

☐ Memo Item

Transaction ID : SB17.7044

B. JOHN ELORANTA

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2016

Amount of Each Disbursement this Period

1233.93

☐ Memo Item

Transaction ID : SB17.7048

C. JOHN ELORANTA

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2016

Amount of Each Disbursement this Period

1233.93

☐ Memo Item

Transaction ID : SB17.7053

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3701.81

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. JOHN ELORANTA

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2016

Amount of Each Disbursement this Period

1233.95

☐ Memo Item

Transaction ID : SB17.7057

B. JOHN ELORANTA

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

1233.93

☐ Memo Item

Transaction ID : SB17.7062

C. JOHN ELORANTA

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2016

Amount of Each Disbursement this Period

1233.93

☐ Memo Item

Transaction ID : SB17.7066

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3701.81

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. FLEETFARMMailing Address 512 LAUREL STREET
PO BOX 5055

City BRAINERD State MN Zip Code 56401

Purpose of Disbursement
RENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2016

Amount of Each Disbursement this Period

450.00

☐ Memo Item

Transaction ID : SB17.7022

B. FLS CONNECT, LLCMailing Address 7300 HUDSON BLVD.
SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
TELEMARKETING: FUNDRAISING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2016

Amount of Each Disbursement this Period

7936.60

☐ Memo Item

Transaction ID : SB17.7024

C. FLS CONNECT, LLCMailing Address 7300 HUDSON BLVD.
SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
TELEMARKETING: FUNDRAISING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		12		2016

Amount of Each Disbursement this Period

445.00

☐ Memo Item

Transaction ID : SB17.7025

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8831.60

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. FP1 PUBLIC AFFAIRS LLC

Mailing Address PO BOX 16504

City	State	Zip Code
ALEXANDRIA	VA	22302

Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		12		2016

Amount of Each Disbursement this Period

1155.87

☐ Memo Item

Transaction ID : SB17.7027

B. HEINRICH ENVELOPE CORPORATION

Mailing Address 925 ZANE AVENUE NORTH

City	State	Zip Code
MINNEAPOLIS	MN	55422

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2016

Amount of Each Disbursement this Period

253.49

☐ Memo Item

Transaction ID : SB17.7029

C. LITHO TECH

Mailing Address 1600 WEST 92ND STREET

City	State	Zip Code
BLOOMINGTON	MN	55431

Purpose of Disbursement
PRINTING AND DESIGN SERVICES

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2016

Amount of Each Disbursement this Period

811.03

☐ Memo Item

Transaction ID : SB17.7034

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2220.39

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. MR. STEWART MILLS

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
IN-KIND: RENT

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: MN District: 08

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2016

Amount of Each Disbursement this Period

4326.67

☐ Memo Item

Transaction ID : SB17.10059

B. MR. STEWART MILLS

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
IN-KIND: VIDEO PRODUCTION SERVICES

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: MN District: 08

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2016

Amount of Each Disbursement this Period

625.00

☐ Memo Item

Transaction ID : SB17.10060

C. MR. STEWART MILLS

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
IN-KIND: RENT

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: MN District: 08

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2016

Amount of Each Disbursement this Period

4326.67

☐ Memo Item

Transaction ID : SB17.10063

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9278.34

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. MR. STEWART MILLS

Mailing Address PO BOX 1039

City BRAINERD	State MN	Zip Code 56401
-------------------------	--------------------	--------------------------

Purpose of Disbursement
IN-KIND: RENT

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	--

State: MN District: 08

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
03 / 29 / 2016

Amount of Each Disbursement this Period

4326.67

☐ Memo Item

Transaction ID : SB17.10064

B. MINNESOTA UI FUND

Mailing Address 332 MINNESOTA ST

City SAINT PAUL	State MN	Zip Code 55101
---------------------------	--------------------	--------------------------

Purpose of Disbursement
UNEMPLOYMENT INSURANCE

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

State: District:

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
03 / 14 / 2016

Amount of Each Disbursement this Period

252.99

☐ Memo Item

Transaction ID : SB17.7036

C. OFFICE MAX

Mailing Address 7626 CLEARWATER ROAD

City BAXTER	State MN	Zip Code 56425
-----------------------	--------------------	--------------------------

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

State: District:

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
03 / 16 / 2016

Amount of Each Disbursement this Period

22.30

☐ Memo Item

Transaction ID : SB17.7037

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4601.96

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. ORGANIC PAYROLLMailing Address 2501 PARMENTER STREET
SUITE 100B

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement
PAYROLL FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2016

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Transaction ID : SB17.7038

B. ORGANIC PAYROLLMailing Address 2501 PARMENTER STREET
SUITE 100B

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement
PAYROLL TAXES & WITHHOLDINGS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		11		2016

Amount of Each Disbursement this Period

567.38

☐ Memo Item

Transaction ID : SB17.7041

C. ORGANIC PAYROLLMailing Address 2501 PARMENTER STREET
SUITE 100B

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement
PAYROLL FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2016

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Transaction ID : SB17.7042

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

657.38

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 72 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. ORGANIC PAYROLLMailing Address 2501 PARMENTER STREET
SUITE 100B

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement
PAYROLL TAXES & WITHHOLDINGS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2016

Amount of Each Disbursement this Period

567.36

☐ Memo Item

Transaction ID : SB17.7045

B. ORGANIC PAYROLLMailing Address 2501 PARMENTER STREET
SUITE 100B

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement
PAYROLL FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2016

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Transaction ID : SB17.7046

C. ORGANIC PAYROLLMailing Address 2501 PARMENTER STREET
SUITE 100B

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement
PAYROLL FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2016

Amount of Each Disbursement this Period

55.50

☐ Memo Item

Transaction ID : SB17.7049

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

667.86

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. ORGANIC PAYROLLMailing Address 2501 PARMENTER STREET
SUITE 100B

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement
PAYROLL TAXES & WITHHOLDINGS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2016

Amount of Each Disbursement this Period

567.38

☐ Memo Item

Transaction ID : SB17.7050

B. ORGANIC PAYROLLMailing Address 2501 PARMENTER STREET
SUITE 100B

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement
PAYROLL FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2016

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Transaction ID : SB17.7051

C. ORGANIC PAYROLLMailing Address 2501 PARMENTER STREET
SUITE 100B

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement
PAYROLL TAXES & WITHHOLDINGS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		22		2016

Amount of Each Disbursement this Period

567.40

☐ Memo Item

Transaction ID : SB17.7054

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1179.78

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. ORGANIC PAYROLLMailing Address 2501 PARMENTER STREET
SUITE 100B

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement
PAYROLL FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2016

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Transaction ID : SB17.7055

B. ORGANIC PAYROLLMailing Address 2501 PARMENTER STREET
SUITE 100B

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement
PAYROLL TAXES & WITHHOLDINGS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2016

Amount of Each Disbursement this Period

567.34

☐ Memo Item

Transaction ID : SB17.7058

C. ORGANIC PAYROLLMailing Address 2501 PARMENTER STREET
SUITE 100B

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement
PAYROLL FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Transaction ID : SB17.7059

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

657.34

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. ORGANIC PAYROLLMailing Address 2501 PARMENTER STREET
SUITE 100B

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement
PAYROLL TAXES & WITHHOLDINGS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2016

Amount of Each Disbursement this Period

556.55

☐ Memo Item

Transaction ID : SB17.7063

B. ORGANIC PAYROLLMailing Address 2501 PARMENTER STREET
SUITE 100B

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement
PAYROLL FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2016

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Transaction ID : SB17.7064

C. PURCELL CONSULTING, LLC

Mailing Address PO BOX 403

City ANNANDALE State MN Zip Code 55302

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2016

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Transaction ID : SB17.7071

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5601.55

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. PURCELL CONSULTING, LLC

Mailing Address PO BOX 403

City	State	Zip Code
ANNANDALE	MN	55302

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2016

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Transaction ID : SB17.7072

B. RED CURVE SOLUTIONS, LLC

Mailing Address 138 CONANT STREET, 2ND FLOOR

City	State	Zip Code
BEVERLY	MA	01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		11		2016

Amount of Each Disbursement this Period

3104.85

☐ Memo Item

Transaction ID : SB17.7073

C. RED CURVE SOLUTIONS, LLC

Mailing Address 138 CONANT STREET, 2ND FLOOR

City	State	Zip Code
BEVERLY	MA	01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2016

Amount of Each Disbursement this Period

3100.00

☐ Memo Item

Transaction ID : SB17.7074

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

11204.85

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. RED CURVE SOLUTIONS, LLC

Mailing Address 138 CONANT STREET, 2ND FLOOR

City	State	Zip Code
BEVERLY	MA	01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		14		2016

Amount of Each Disbursement this Period

3104.65

☐ Memo Item

Transaction ID : SB17.7075

B. SCM ASSOCIATES, INC.Mailing Address 1283 MAIN STREET
PO BOX 254

City	State	Zip Code
DUBLIN	NH	03444

Purpose of Disbursement
DIRECT MAIL PRINTING & POSTAGE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

18378.30

☐ Memo Item

Transaction ID : SB17.7076

C. SCM ASSOCIATES, INC.Mailing Address 1283 MAIN STREET
PO BOX 254

City	State	Zip Code
DUBLIN	NH	03444

Purpose of Disbursement
EMAIL MARKETING

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		11		2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Transaction ID : SB17.7077

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

21982.95

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. SCM ASSOCIATES, INC.Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
DIRECT MAIL PRINTING & POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		12		2016

Amount of Each Disbursement this Period

4192.81

☐ Memo Item

Transaction ID : SB17.7078

B. SCM ASSOCIATES, INC.Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
DIRECT MAIL PRINTING & POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2016

Amount of Each Disbursement this Period

5264.31

☐ Memo Item

Transaction ID : SB17.7079

C. SCM ASSOCIATES, INC.Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
DIRECT MAIL PRINTING & POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2016

Amount of Each Disbursement this Period

1057.66

☐ Memo Item

Transaction ID : SB17.7080

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

10514.78

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 79 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. SCM ASSOCIATES, INC.Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
DIRECT MAIL PRINTING & POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		14		2016

Amount of Each Disbursement this Period

4931.75

☐ Memo Item

Transaction ID : SB17.7081

B. SCM ASSOCIATES, INC.Mailing Address 1283 MAIN STREET
PO BOX 254

City DUBLIN State NH Zip Code 03444

Purpose of Disbursement
DIRECT MAIL PRINTING & POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2016

Amount of Each Disbursement this Period

1472.20

☐ Memo Item

Transaction ID : SB17.7082

C. STRIPE

Mailing Address 3180 18TH ST

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

50.47

☐ Memo Item

Transaction ID : SB17.7083

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6454.42

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

48.85

☐ Memo Item

Transaction ID : SB17.7084

B. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2016

Amount of Each Disbursement this Period

6.10

☐ Memo Item

Transaction ID : SB17.7085

C. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2016

Amount of Each Disbursement this Period

29.30

☐ Memo Item

Transaction ID : SB17.7086

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

48.85

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2016

Amount of Each Disbursement this Period

42.82

☐ Memo Item

Transaction ID : SB17.7087

B. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

Amount of Each Disbursement this Period

4.10

☐ Memo Item

Transaction ID : SB17.7088

C. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2016

Amount of Each Disbursement this Period

39.39

☐ Memo Item

Transaction ID : SB17.7089

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

86.31

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2016

Amount of Each Disbursement this Period

1.75

☐ Memo Item

Transaction ID : SB17.7090

B. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		26		2016

Amount of Each Disbursement this Period

33.97

☐ Memo Item

Transaction ID : SB17.7091

C. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2016

Amount of Each Disbursement this Period

1.32

☐ Memo Item

Transaction ID : SB17.7092

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

37.04

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2016

Amount of Each Disbursement this Period

1.17

☐ Memo Item

Transaction ID : SB17.7093

B. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

52.99

☐ Memo Item

Transaction ID : SB17.7094

C. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2016

Amount of Each Disbursement this Period

16.50

☐ Memo Item

Transaction ID : SB17.7095

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

70.66

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		22		2016

Amount of Each Disbursement this Period

6.57

☐ Memo Item

Transaction ID : SB17.7099

B. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		23		2016

Amount of Each Disbursement this Period

4.34

☐ Memo Item

Transaction ID : SB17.7100

C. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2016

Amount of Each Disbursement this Period

2.65

☐ Memo Item

Transaction ID : SB17.7101

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

13.56

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		26		2016

Amount of Each Disbursement this Period

2.06

☐ Memo Item

Transaction ID : SB17.7102

B. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2016

Amount of Each Disbursement this Period

106.14

☐ Memo Item

Transaction ID : SB17.7103

C. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2016

Amount of Each Disbursement this Period

21.40

☐ Memo Item

Transaction ID : SB17.7104

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

129.60

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 87 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2016

Amount of Each Disbursement this Period

1.75

☐ Memo Item

Transaction ID : SB17.7105

B. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		09		2016

Amount of Each Disbursement this Period

3.20

☐ Memo Item

Transaction ID : SB17.7106

C. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2016

Amount of Each Disbursement this Period

29.37

☐ Memo Item

Transaction ID : SB17.7107

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

34.32

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 88 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		11		2016

City	State	Zip Code
SAN FRANCISCO	CA	94110

Amount of Each Disbursement this Period

4.00

Purpose of Disbursement
MERCHANT FEESCategory/
Type☐ Memo Item

Transaction ID : SB17.7108

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		14		2016

City	State	Zip Code
SAN FRANCISCO	CA	94110

Amount of Each Disbursement this Period

7.55

Purpose of Disbursement
MERCHANT FEESCategory/
Type☐ Memo Item

Transaction ID : SB17.7109

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		15		2016

City	State	Zip Code
SAN FRANCISCO	CA	94110

Amount of Each Disbursement this Period

46.74

Purpose of Disbursement
MERCHANT FEESCategory/
Type☐ Memo Item

Transaction ID : SB17.7110

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

58.29

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 89 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

5.25

☐ Memo Item

Transaction ID : SB17.7111

B. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2016

Amount of Each Disbursement this Period

0.59

☐ Memo Item

Transaction ID : SB17.7112

C. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2016

Amount of Each Disbursement this Period

80.60

☐ Memo Item

Transaction ID : SB17.7113

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

86.44

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 90 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		22		2016

Amount of Each Disbursement this Period

16.88

☐ Memo Item

Transaction ID : SB17.7114

B. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2016

Amount of Each Disbursement this Period

26.85

☐ Memo Item

Transaction ID : SB17.7115

C. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2016

Amount of Each Disbursement this Period

8.79

☐ Memo Item

Transaction ID : SB17.7116

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

52.52

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 91 OF 97

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2016

Amount of Each Disbursement this Period

63.73

☐ Memo Item

Transaction ID : SB17.7117

B. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		28		2016

Amount of Each Disbursement this Period

1.90

☐ Memo Item

Transaction ID : SB17.7118

C. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2016

Amount of Each Disbursement this Period

82.09

☐ Memo Item

Transaction ID : SB17.7119

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

147.72

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2016

Amount of Each Disbursement this Period

2313.00

☐ Memo Item

Transaction ID : SB17.7120

B. STRIPE

Mailing Address 3180 18TH ST

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2016

Amount of Each Disbursement this Period

117.53

☐ Memo Item

Transaction ID : SB17.7121

C. CHARLES SZOLD

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2016

Amount of Each Disbursement this Period

2185.00

☐ Memo Item

Transaction ID : SB17.7068

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2313.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. CHARLES SZOLD

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2016

Amount of Each Disbursement this Period

2916.39

☐ Memo Item

Transaction ID : SB17.7069

B. CHARLES SZOLD

Mailing Address PO BOX 1039

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
MOVING EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2016

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Transaction ID : SB17.7011

C. THE CHAMPION GROUP LLCMailing Address 701 E. WASHINGTON AVENUE
SUITE 201

City	State	Zip Code
MADISON	WI	53701

Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		11		2016

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Transaction ID : SB17.7122

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

14916.39

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. THE CHAMPION GROUP LLCMailing Address 701 E. WASHINGTON AVENUE
SUITE 201

City MADISON State WI Zip Code 53701

Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		19		2016

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Transaction ID : SB17.7123

B. THE CHAMPION GROUP LLCMailing Address 701 E. WASHINGTON AVENUE
SUITE 201

City MADISON State WI Zip Code 53701

Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2016

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Transaction ID : SB17.7124

C. THE CHAMPION GROUP LLCMailing Address 701 E. WASHINGTON AVENUE
SUITE 201

City MADISON State WI Zip Code 53701

Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2016

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Transaction ID : SB17.7125

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

15000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. THE TOWNSEND GROUP

Mailing Address 1006 PENDLETON STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 29 / 2016

Amount of Each Disbursement this Period

1597.36

☐ Memo Item

Transaction ID : SB17.7127

B. USPS

Mailing Address 422 LAUREL ST

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 25 / 2016

Amount of Each Disbursement this Period

0.49

☐ Memo Item

Transaction ID : SB17.7128

C. USPS

Mailing Address 422 LAUREL ST

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 26 / 2016

Amount of Each Disbursement this Period

392.00

☐ Memo Item

Transaction ID : SB17.7129

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1989.85

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 422 LAUREL ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2016

City	State	Zip Code
BRAINERD	MN	56401

Amount of Each Disbursement this Period

Purpose of Disbursement
POSTAGE

98.00

Candidate Name

Category/
Type☐ Memo Item

Transaction ID : SB17.7130

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

--

Candidate Name

Category/
Type☐ Memo Item

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

--

Candidate Name

Category/
Type☐ Memo Item

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

98.00

154634.84

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF STEWART MILLS

Full Name (Last, First, Middle Initial)

A. WHITEBIRCH, INC

Mailing Address 9252 BREEZY POINT DRIVE

Date of Disbursement

M M	D D	Y Y Y Y
01	19	2016

City	State	Zip Code
BREEZY POINT	MN	56472

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
CONTRIBUTION REFUNDCategory/
Type☐ Memo Item

Transaction ID : SB20A.7134

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	D D	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type☐ Memo Item

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	D D	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type☐ Memo Item

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

250.00

250.00